



## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

|  |  | Attorney Docket No: PD-201011                            |   |                           |   |  |  |   |   |                                    |                           |      |
|--|--|--|---|---------------------------|---|--|--|---|---|------------------------------------|---------------------------|------|
|  |  |  |   |                           |   |  |  |   | Origina<br>Continu<br>Division<br>Continu<br>Supple | uatior<br>n<br>uatior              | n-in-Pa                   | ırt  |
| As a below named inv   |  |  |   |                           |   |  |  |   |   |                                    |                           |      |
| My residence, post office address and citizenship are as stated below next to my name.   |  |  |   |                           |   |  |  |   |   |                                    |                           |      |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <b>Dual Channel Remote Terminal</b>   |  |  |   |                           |   |  |  |   |   | on                                 |                           |      |
|  | tached hereto.   | as Appl  | ication Serial No   |                           |   |  |  |   |   |                                    |                           |      |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by an amendment referred to above.   |  |  |   |                           |   |  |  |   |   | е                                  |                           |      |
| acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to the material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.   |  |  |   |                           |   |  |  |   |   | ∍ to                               |                           |      |
| Thereby claim foreign priority benefits under 35 U.S.C. §§119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application that designated at least one country of their than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate, or of any PCT international application, having a filing date before that of the application on which priority is claimed: |  |  |   |                           |   |  |  |   |   |                                    | /<br>r                    |      |
| Foreign Application Number   | Countr   | /  | Foreign Filing Date<br>(MM/DD/YYYY)   |                           | Priority                                  | rity Claimed                           |  |   | Certified Copy<br>Attached                          |                                    |                           |      |
| Number   |  |  |   |                           | ] Yes                                     |  | No   |   | Yes   |                                    | No                        | 1    |
| Topics   |  |  |   |                           | ] Yes                                     |  | No   |   | Yes   |                                    | No                        | 7    |
| Thereby claim the ber  | nefit under 35 l   | J.S.C. §   | 119(e) of any United St   | ate                       | s provis                                  | sional                                 | applica                                    | ation(                                  | s) list   | ed be                              | low:                      | _    |
| Application Numb   | er F   | iling Da   | te (MM/DD/YYYY)   |                           |   |  |  |   |   |                                    |                           |      |
|  |  |  |   |                           |   |  |  |   |   |                                    |                           |      |
|  |  |  |   |                           |   |  |  |   |   |                                    |                           |      |
| international application<br>each of the claims of the manner provided land<br>States Patent and Tra   | on designating<br>this application<br>by the first para<br>demark Office<br>ecame availabl | the Unit<br>is not d<br>agraph o<br>all infor<br>e betwe | 20 of any United Statested States of America, I isclosed in the prior Un of 35 U.S.C. §112, I ack mation known to me to en the filing date of the | iste<br>itec<br>nov<br>be | ed belov<br>d States<br>wledge<br>materia | v and<br>or Pothe<br>the do<br>al to p | , insofa<br>CT inte<br>uty to d<br>atental | r as t<br>rnatio<br>lisclos<br>bility a | the su<br>onal a<br>se to t<br>as def               | bject<br>pplica<br>the U<br>ined i | ation ir<br>nited<br>n 37 | r of |
| U.S. Parent Application or Parent PCT Number   |  | Fi   | Filing Date (MM/DD/YYY  |                           | <b>Y</b> 1                                |  |  | atent Number<br>if applicable)          |   |                                    |                           |      |
|  |  |  |   |                           |   |  |  |   |   |                                    |                           |      |

## DECLARATION/POWER OF ATTORNEY

Page 2 of 2

Attorney Docket No: PD-201011

I hereby appoint the following attorneys, or agent and attorneys, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

John T. Whelan

Registration No. 32,448

Craig L. Plastrik

Registration No. 41,254

Michael W. Sales

Registration No. 30,213

## **Correspondence Address:**

Name:

**Hughes Electronics Corporation** 

Patent Docket Administration

Address:

P.O. Box 956

Bldg. 1, Mail Stop A109

City/State/Zip:

El Segundo, CA 90245-0956

Country:

USA

Telephone: 301-428-5965

Facsimile: 301-428-2802

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such false statements may jeopardize the validity of the application or any patent issued thereon.

| Full Name of Sole or Joint Inventor:              | Inventor's Signature:  |             | Date:    |  |  |  |  |  |  |  |
|---|------------------------|-------------|----------|--|--|--|--|--|--|--|
| Mike Lohman                                       | Will Lalin             |             | 10-23-01 |  |  |  |  |  |  |  |
| Residence (City and State)                        | Citizen                | nship       |          |  |  |  |  |  |  |  |
| Germantown, Maryland                              |                        | USA         |          |  |  |  |  |  |  |  |
| nesidence Address (Street/City/State/Zip)         |                        |             |          |  |  |  |  |  |  |  |
| 8805 Lake Placid Lane, Germantown, MD 20874       |                        |             |          |  |  |  |  |  |  |  |
| 歪ull Name of Joint Inventor:                      | Invertion's Signature: |             | Date:    |  |  |  |  |  |  |  |
| Jack Rozmaryn                                     | 101                    |             | :        |  |  |  |  |  |  |  |
| Residence (City and State)                        | Citizenship            |             |          |  |  |  |  |  |  |  |
| Silver Spring, Maryland                           | ///                    | USA         |          |  |  |  |  |  |  |  |
| Residence Address (Street/City/State/Zip)         |                        |             |          |  |  |  |  |  |  |  |
| 205 Hermleigh Road, Silver Spring, Maryland 20902 |                        |             |          |  |  |  |  |  |  |  |
| Full Name of Joint Inventor:                      | Inventor's Signature:  |             | Date:    |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |
| Residence (City and State)                        |                        | Citizenship |          |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |
| Residence Address (Street/City/State/Zip)         |                        |             |          |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |
| Full Name of Joint Inventor:                      | Inventor's Signature:  |             | Date:    |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |
| Residence (City and State)                        | Citizenship            |             |          |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |
| Residence Address (Street/City/State/Zip)         |                        |             |          |  |  |  |  |  |  |  |
|   |                        |             |          |  |  |  |  |  |  |  |